

## COMPLIANCE SAMPLING SITE **CHANGE** FORM

Requests to change Bacteria, Chemical, or Lead and Copper sampling sites must be submitted in writing. Please print this form, fill it out and email or fax the changes to our office for approval **prior** to collecting the sample at a new sampling location. Sample results taken from sites that do not match the DES approved sites will be rejected.

Name of Syste	m:						DES use only stem Typ		C	Р	N		
Town:						EP	A #			_	- 1		
For Bacteria s	sites, sai	-	uld be ta	aken fro	to: (603 om a site	e that is	3490 or <u>l</u> s in the n	niddle	of the	distrib	outio	n syste	em. Routi
OLD Site ID # (ex: 001, 002, etc)		LOCATION/DESCRIPTION											
NEW													
<i>For Chemical</i> when sampling	sites, sa		ould be	taken a	to: (60 fter trea	atment :	5171 or at the ent	ry poi	nt to t	he dist	ribut	tion, (n	
OLD Monitoring Site ID # (ex: 001, 501, etc)					LOC	CATIO	N/DESC	RIPTI	ON				

## LEAD/COPPER

Fax or email Lead/Copper changes to: (603) 271-3490 or <u>joan.fitzsimmons@des.nh.gov</u>

For Lead and Copper sites, samples should be taken from drinking water sites across the distribution system.

- a) if a site is active, it will show on your Master Sampling Schedule
- b) if a site is inactive, and you wish to sample there, you MUST contact us before you take the sample. Sample results taken at inactive sites will be rejected.
- c) if a site's name has changed (street names, room numbers, buildings), you MUST contact us before you take the sample. Sample results taken from sites that do not match the active site list will be rejected.

Lead and Copper samples may only be taken from "active" sites. If you are unsure of your active sites, need to add active sites, or need to make an "inactive" site active again, please contact Joan Fitzsimmons.

OLD Monitoring Site ID # (ex: 001, 002, etc)		LOCATION/DESCRIPTION	
NEW			
+			
Reason for requ	ested cl	hange(s):	
Date requested:_		By whom:	
FOR DES USI Approved:		Y: Date:	
		By:Date:	

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